

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L56060

FILED
Jan 08, 2005
Secretary of State

Entity Name: JACK'S TROPICAL GARDENS, II, INC.

Current Principal Place of Business:

30533 COUNTY RD #437
SORRENTO, FL 32776 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 489
SORRENTO, FL 32776 US

New Mailing Address:

FEI Number: 59-3019416

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KECK, JOHN C.
2450 E. CROOKED LAKE CLUB BLVD.
EUSTIS, FL 32726 US

Name and Address of New Registered Agent:

KECK, JOHN C.
2440 E. CROOKED LAKE CLUB BLVD.
EUSTIS, FL 32726 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JOHN C. KECK

01/08/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KECK, JOHN C.,
Address: 2450 E. CROOKED LAKE CLUB BLVD.
City-St-Zip: EUSTIS, FL

Title: STD () Delete
Name: BARNES, RICHARD V.,
Address: 2998 ASPEN RD.
City-St-Zip: MOSINEE, WI

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN C. KECK

PRES

01/08/2005

Electronic Signature of Signing Officer or Director

Date